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# WS10 – Cross Connection Certification Amendment

MassDEP Bureau of Water Resources, Drinking Water



**EEA ePLACE Portal**

# Overview



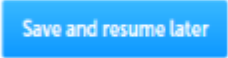

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- ☐ This presentation is to assist in completing a **WS10- Cross Connection Certification Amendment**.
- ☐ Use this form to request modifications to your existing Cross Connection Certification.
- ☐ This certification consist of an approval to allow applicants to perform tests on backflow prevention devices or conduct cross connection surveys on drinking water lines. Legislative authority for this permit is stated in M.G.L. Chapter 111 s.160A. Regulatory authority for this permit is stated in 310 CMR 22.22 (13), Drinking Water Regulations.
- ☐ This presentation will take you screen by screen through the EEA ePLACE online permitting application process.



# General Navigation

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- ☐ Always Click  to move to the next page.
- ☐ Do NOT use the Browser Back Button  as this will take you out of the system
- ☐ Any field with a red asterisk (\*) is required before you can move off the page.
- ☐ Click  to save your work and resume at a later time
- ☐ Click on the tool tips where applicable to get more details 
- ☐ We strongly suggest using Internet Explorer as a preferred browser



# How to Apply

## Log in to your account:

- ❑ Click or type this address on your browser:

[Mass.gov Licensing and Permitting Portal](https://www.mass.gov/Licensing-and-Permitting-Portal)

- ❑ Log into your account in EEA ePlace using your username/password

**Mass.gov** State Offices & Courts | State A-Z Topics | State Forms | Accessibility FAQs

An Official website of the Commonwealth of Massachusetts

### EEA ePLACE Portal

[Announcements](#) [Accessibility Support](#) [Register for an Account](#) [Reports \(2\)](#) [Login](#)

Need Help? For technical assistance in using this web application, please call the ePLACE Help Desk Team at (844) 733-7522 or (844) 733-ePLAC between the hours of 7:30 AM-5:00 PM Monday-Friday, with the exception of all Commonwealth and Federally observed holidays. If you prefer, you can also e-mail us at [ePLACE\\_helpdesk@state.ma.us](mailto:ePLACE_helpdesk@state.ma.us). For assistance with non-technical questions, please contact the issuing Agency directly using the links below.

Contact:  
[Energy and Environmental Affairs, MASSDEP](#)  
[Energy and Environmental Affairs, MDAR](#)  
[Energy and Environmental Affairs, DCR](#)

For DPL, DCAMP and ABCC permits or licenses, please [click here](#).

**Convenience Fee:** Please note there will be a convenience fee for all online credit card transactions. There is also a nominal fee for online payment by check.

[Home](#)

#### Welcome to the Commonwealth of Massachusetts ePLACE Portal

The Commonwealth of Massachusetts is pleased to offer online access to many licensing, permitting and certificate services. With ePLACE, the Commonwealth hopes to deliver more efficient, convenient, and interactive e-government services.

**Options for Licensees and Applicants:**

- Apply for, Renew, or Amend a License, Permit, Certificate, Notification or Registration
- Make Payments Online

**ePLACE Portal Account Registration:**

In order to utilize most of the services available through the ePLACE, you must first register for an account to do any of the following:

- Apply for a License, Permit, Certificate, Notification or Registration

**Login**

User Name or E-mail:

Password:

[Login »](#)

☐ Remember me on this computer

[I've forgotten my password](#)  
[New Users: Register for an Account](#)

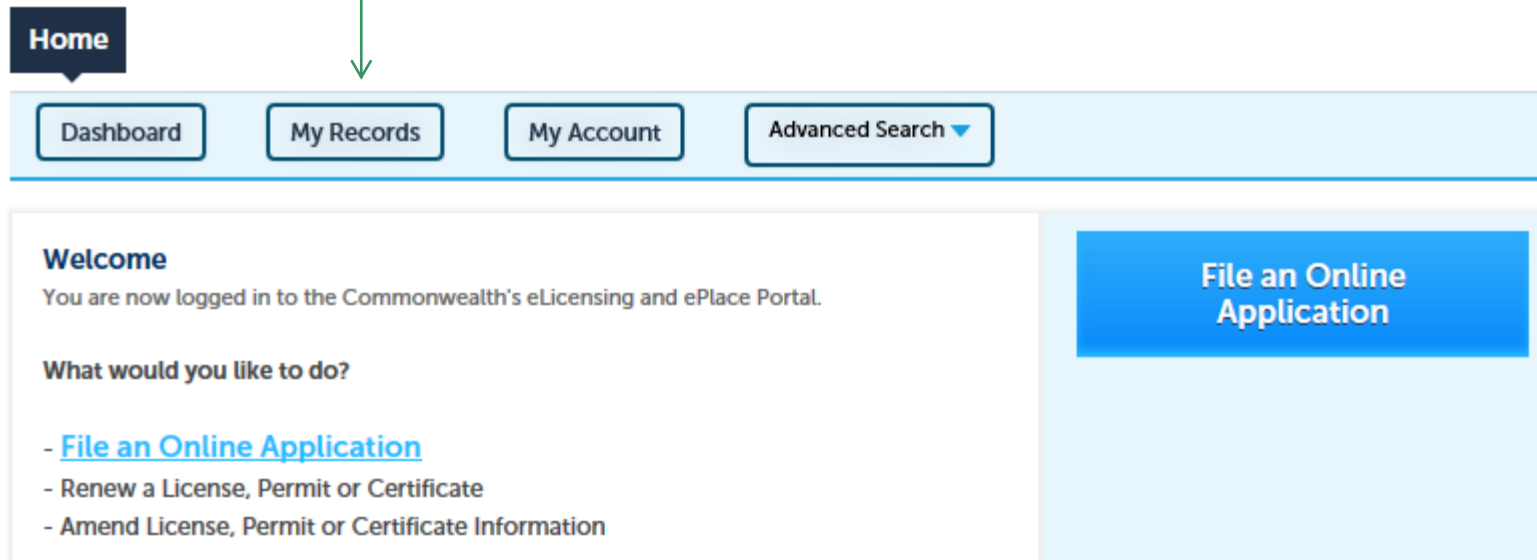
Please note: At this time, the ePLACE Portal services only some (not all) licenses, permits and certificates issued by Energy and Environmental Affairs(EEA). It does



**EEA ePLACE Portal**

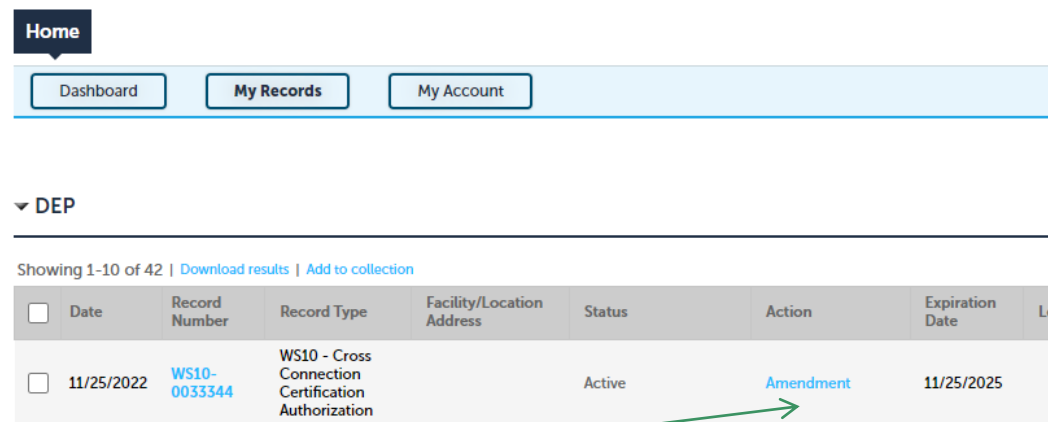
# File an Online Amendment

- ❑ Click on “ My Records” tab to start



# Access your record

- ☐ A list of your records will be displayed
- ☐ Locate the permit record you need to Amend/Modify
- ☐ Against the record, you will have the Amendment link under Actions
- ☐ Click on “Amendment” link to continue



Home

Dashboard My Records My Account

▼ DEP

Showing 1-10 of 42 | [Download results](#) | [Add to collection](#)

<input type="checkbox"/>	Date	Record Number	Record Type	Facility/Location Address	Status	Action	Expiration Date	Le
<input type="checkbox"/>	11/25/2022	<a href="#">WS10-0033344</a>	WS10 - Cross Connection Certification Authorization		Active	<a href="#">Amendment</a>	11/25/2025	



# Step 1: Contact Information

- Applicant information will display in the Permittee section
- Click “Continue Application” to proceed

DEP Applications

WS10 - Cross Connection Certification Amendment

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Step 1: Contact Information > Page 1 of 1

\* indicates a required field.

Permittee

"Permittee" is the individual/applicant for this application.

Permittee:

Tester  
100 Cambridge St  
Boston, MA, 02108  
Telephone #: 111-111-1111 Email: Hartell.Johnson@mass.gov

Edit or View

Continue Application »

Save and resume later



# Step 2 : Application Information

- ❑ Amend the type of certification you are applying for
- ❑ Update training organization and exam date
- ❑ Click on “Continue Application” to proceed

## WS10 - Cross Connection Certification Amendment

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### Step 2: Application Information > Page 1 of 2

\* indicates a required field.

Certification Name

You are required to provide the following information demonstrating that you passed an approved MassDEP examination as listed. On the next page, you will need to attach supporting documentation as proof that you passed this examination.

\* Certification Type: ?

Combination Certification (Backflow Tester & Cross Connection Surveyor)

Backflow Prevention Device Tester Training Provided by (organization): \* ?

test

Backflow Prevention Device Tester Date of Examination: \* ?

11/01/2022

Cross Connection Surveyor Training Provided by (organization): \* ?

Cross Connection Surveyor Date of Examination: \* ?

MM/DD/YYYY

Continue Application »

Save and resume later





# Step 3: Documents

- ☐ Upload all required documents for your application
- ☐ The required documents will be listed in the table
- ☐ To begin attaching documents click “Browse”
- ☐ **Please Note:** Documents cannot be mailed to MassDEP agency, you must attach the electronic copy in this section.

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Step 3: Document > Page 1 of 1

\* indicates a required field.

List of Documents

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Documents:

**Please upload 1 Required Document(s) which are mandatory to submit this Application:**

1. Proof of written examination approved by the Department for Cross Connection Control Surveyor

Attachment

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When uploading file document(s) the maximum file size allowed is 50 MB.  
The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.  
The document 'Description' MUST NOT exceed 50 characters in length.  
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.  
.bat;.bin;.dll;.exe;.js;.msi;.sql;.vbs;.ade;.adp;.chm;.cmd;.com;.cpl;.hta;.ins;.isp;.jar;.jse;.lib;.lnk;.mde;.msc;.msp;.mst;.php;.pif;.scr;.sct;.shb;.sys;.vb;.vbe;.vxd;.wsc;.wsf;.wsh  
are disallowed file types to upload.

Name	Type	Size	Latest Update	Description	Action
No records found.					

Browse

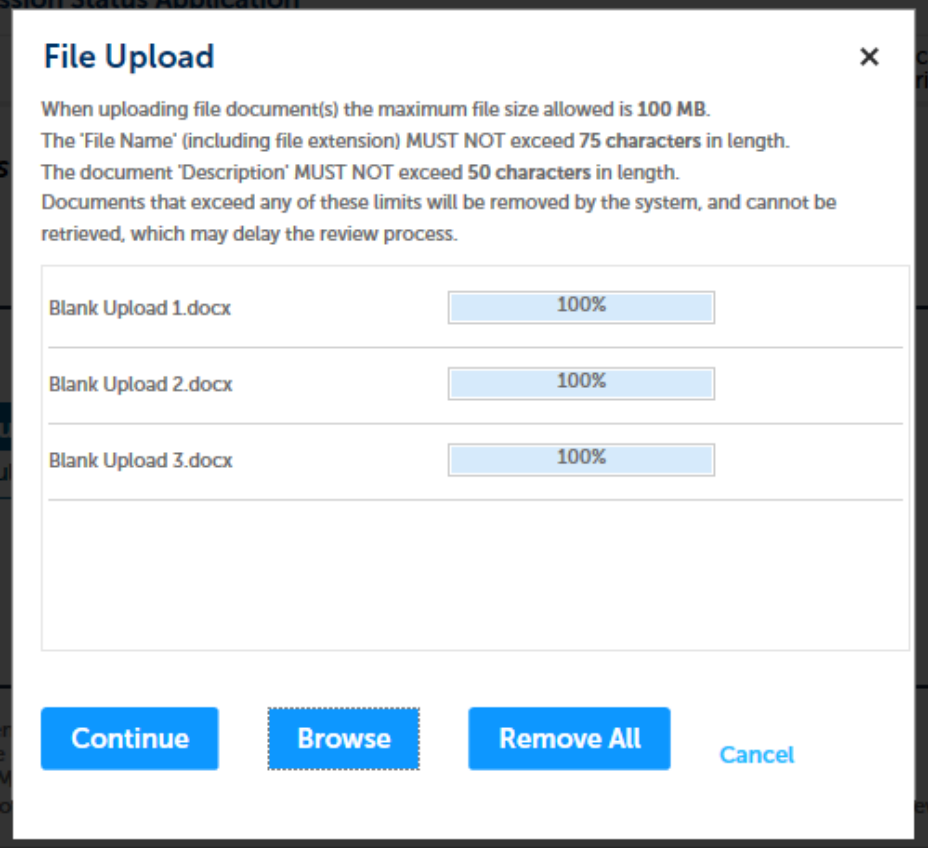
Continue Application »

Save and resume later



## Step 3: Documents (Attaching)

- ❑ A “File Upload” window opens
- ❑ Click “Browse”
- ❑ Choose the file(s) you want to attach
- ❑ When all files reach 100%, click “Continue”



**File Upload** [X]

When uploading file document(s) the maximum file size allowed is **100 MB**.  
The 'File Name' (including file extension) **MUST NOT** exceed **75 characters** in length.  
The document 'Description' **MUST NOT** exceed **50 characters** in length.  
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

Blank Upload 1.docx	100%
Blank Upload 2.docx	100%
Blank Upload 3.docx	100%

[Continue] [Browse] [Remove All] [Cancel]



## Step 3: Documents (Attaching)

- ❑ Select the document type
- ❑ Provide a description of each document that you uploaded
- ❑ Click “Browse” to add more documents
- ❑ When all documents are uploaded and described, click “Save”

File:  
Blank Upload 1.docx  
100%

\* Description (Maximum 50 characters):  
A maximum of 50 characters.

\* Type:  
--Select--

Remove

File:  
Blank Upload 2.docx  
100%

\* Description (Maximum 50 characters):  
A maximum of 50 characters.

\* Type:  
--Select--

Remove

File:  
Blank Upload 3.docx  
100%

\* Description (Maximum 50 characters):  
A maximum of 50 characters.

Save Browse Remove All

Continue Application »

Save and resume later



## Step 3: Documents (Attaching)


- ❑ Select the document type
- ❑ Provide a description of each document that you uploaded
- ❑ Click “Browse” to add more documents
- ❑ When all documents are uploaded and described, click “Save”
- ❑ Click “Continue Application”

The screenshot displays the document upload section of the EEA ePLACE Portal. It features three identical document entry forms stacked vertically. Each form includes a 'File' section with the name 'Blank Upload 1.docx' and a '100%' progress indicator. Below this is a 'Description (Maximum 50 characters)' text area and a 'Type' dropdown menu set to '--Select--'. A 'Remove' link is positioned to the right of the dropdown. At the bottom of the form, there are five buttons: 'Save', 'Browse', 'Remove All', 'Continue Application', and 'Save and resume later'. Green arrows from the list on the left point to the 'Continue Application' button and the 'Save' button.



# Step 3: Documents (Attaching)

- ❑ You should see a message that you have successfully attached documents
- ❑ Review the list of attached documents
- ❑ When ready, click “Continue Application” to proceed

 **The attachment(s) has/have been successfully uploaded.**  
It may take a few minutes before changes are reflected.

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**Step 3: Document > Page 1 of 1**

\* indicates a required field.

**List of Documents**

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Documents:

**Please upload the following Required Document(s) which are mandatory to submit this Application:**  
No Required documents

**Attachment**

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When uploading file document(s) the maximum file size allowed is **50 MB**.  
The 'File Name' (including file extension) **MUST NOT** exceed 75 characters in length.  
The document 'Description' **MUST NOT** exceed 50 characters in length.  
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.  
.bat;.bin;.dll;.exe;.js;.msi;.sql;.vbs;.ade;.adp;.chm;.cmd;.com;.cpl;.hta;.ins;.isp;.jar;.jse;.lib;.lnk;.mde;.msc;.msp;.mst;.php;.pif;.scr;.sct;.shb;.sys;.vb;.vbe;.vxd;.wsc;.wsf;.wsl  
are disallowed file types to upload.

Name	Type	Size	Latest Update	Description	Action
WS10-2_POR_20221019_145458.pdf	Proof of written and practical certification examination which is approved by the Department for Backflow Prevention Device Tester	57.85 KB	11/21/2022	Backflow prevention test	Actions ▼

Browse

Continue Application »

Save and resume later



# Step 4: Published Information

- ❑ Please read instructions for Published Information before proceeding
- ❑ Please review the information and modify accordingly
- ❑ Click “Continue Application” to proceed

## WS10 - Cross Connection Certification Amendment

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### Step 4: Published Information > Page 1 of 1

\* indicates a required field.

#### Employer Information

Employer Name:

#### Published Information

Information from this application and any issued permit will be made available to the public. By default, the information listed below is from your account profile. You may change or delete the information in the fields below with the exception of First and Last name, which are associated with your permit.

Please note that all fields with a red asterisk are required fields. Ensure that you make updates below as needed as the information in the fields below will be made available to the public.

Company Name:

Middle Name:

\* Phone number: ?

6171234567

PO Box/ Address:

\* State:

MA

\* First Name:

Tester

\* Last Name:

Test

E-mail Address:

Hartell.Johnson@mass.go

\* City/Town:

Boston

\* Zip Code:

02108

Continue Application »

Save and resume later



# Step 5: Review

- ☐ The entire application is shown on a single page for your review
- ☐ If you note something you want to change, click “Edit Application”
- ☐ Otherwise, continue to the bottom of the page



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Step 5: Review

Continue Application »

Save and resume later

Please review the information below prior to submission. After the application has been submitted, you will not be able to make changes. To make changes after submittal you must contact the Department directly.

Review and Certification

Edit Application

Permittee

Individual Tester  
100 Cambridge St  
Boston, MA, 02108  
United States

Telephone #:111-111-1111  
E-mail: Hartell.Johnson@mass.gov

Certification Name

Certification Type:  
Backflow Prevention Device Tester Training Provided by (organization):  
Backflow Prevention Device Tester Date of Examination:

Backflow Prevention Device Tester  
Testing user  
09/30/2022

List of Documents

# Step 5: Review continue

- ☐ Read the Certification Statement
- ☐ Click the check box to complete your certification
- ☐ Click “Continue Application” to proceed with your submittal

## Employer Information

Employer Name:

## Published Information

Company Name:

Middle Name:

Phone number: 6171234567

PO Box/ Address:

State: MA

First Name: Tester

Last Name: Test

E-mail Address: Hartell.Johnson@mass.gov

City/Town: Boston

Zip Code: 02108

## Application Submitter

Individual

Tester

Boston, MA, 02108

Telephone #:111-111-1111

E-mail:Hartell.Johnson@mass.gov

"I certify that I have read and understand the instructions that accompany this application and that the statements made as part of this application are true, complete, and correct and that no material information has been omitted. By checking the box below, I understand and agree that I am electronically signing and filing this application."

☒ By checking this box, I agree to the above certification.

Date: 11/21/2022

[Continue Application »](#)

[Save and resume later](#)



**EEA ePLACE Portal**



# Step 6: Application Submitted

- ❑ When you submit your application, you will receive a Record ID so you can track the status of your application online
- ❑ Upon submission of your application please make sure to check your email for system notifications

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*Step 6: Application Submitted*



Successfully Completed.

Thank you for using our online services.  
Your Record Number is 22-WS10-0031-AMD.

You will need this number to check the status of your application.

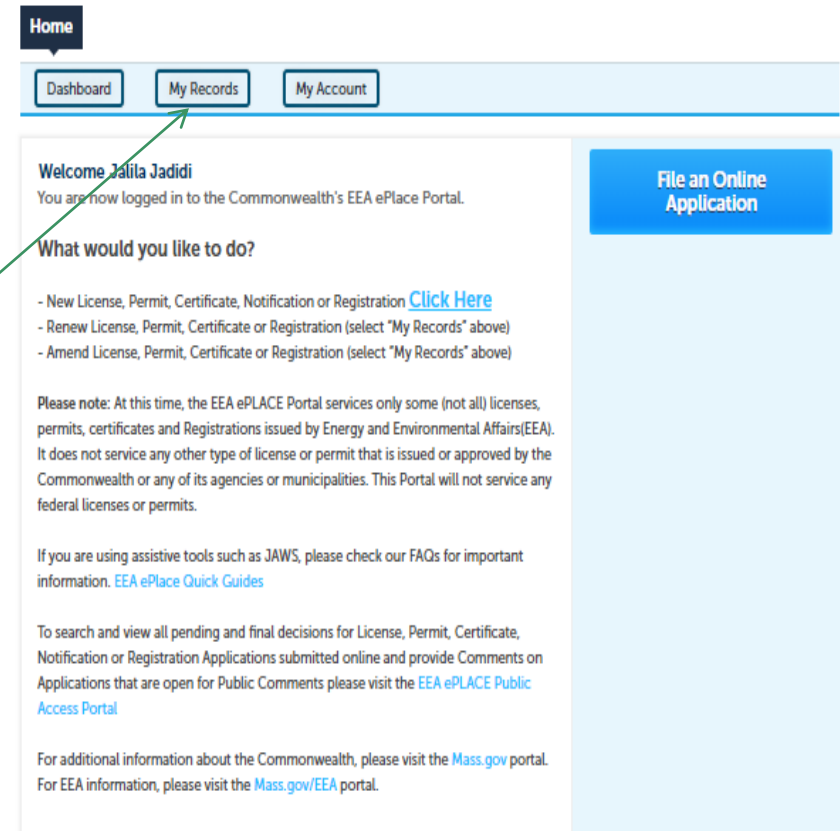


# To check the status of an application

❑ Log on to EEA ePlace portal

❑ <https://eplace.eea.mass.gov/citizenaccess>

❑ Go to your “My Records” page in EEA ePLACE to see or track the status of an application



# Questions?

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For technical assistance:

- ☐ Contact the ePlace Help Desk Team at (844) 733-7522
- ☐ Or send an email to: [ePLACE\\_helpdesk@state.ma.us](mailto:ePLACE_helpdesk@state.ma.us)

For business related questions, please visit the link below:

<https://www.mass.gov/how-to/ws-10-cross-connection-certification>



**EEA ePLACE Portal**